

STATE OF IOWA

CHESTER J. CULVER, GOVERNOR PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
CHARLES J. KROGMEIER, DIRECTOR

INFORMATIONAL LETTER NO. 951

DATE: October 1, 2010

TO: Iowa Medicaid Home and Community Based Service (HCBS) Targeted Case

Managers, Case Managers and Service Workers

ISSUED BY: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

RE: Prior Authorization Review Process for HCBS Waiver Services

EFFECTIVE: October 1, 2010

Effective October 1, 2010 HCBS service requests that exceed the median cost (units) of each waiver service must be reviewed and approved by the Iowa Medicaid Enterprise. This change in the review process is mandated by SF 2288, that requires the Department of Human Service to develop a mechanism to services provided under a home and community based servicers waiver that are in excess of the median amount for payments through the waiver. (For additional information please refer to Informational Letter 928 dated August 2, 2010.) To ease the transition to the new review process the type of services selected for review will be implemented in phases. The purpose of this letter is to identify how the service review process will be implemented. In the future the prior authorization process may be expanded to include other services and ages.

Date	Waiver Service Type
October 1, 2010	CDAC
	Prevocational
	Home & Vehicle Modification
	Environmental & Assistive Devices
November 1, 2010	Respite
	SCL members <18
	Interim Medical Monitoring & Treatment
December 1, 2010	Consumer Choice Option
	Family & Community Support Services
	In-Home Family Therapy

The IME Medical Services Unit may request additional information from you via a certificate of Medical Necessity form or other documents such as the service/treatment plan, itemized estimates, service schedules, etc. You will receive this request for additional information either through ISIS or e-mail. The Medical Services Unit will need to receive all requested materials prior to making a decision. The sooner the requested materials are received the sooner services can be initiated. The IME appreciates your partnership as we work together to serve the needs of Iowa Medicaid members.

Additional information to support the new process will be posted at: http://www.ime.state.ia.us/HCBS/HCBSindex.html#search='HCBS'.

The materials posted include:

- Chart of service plan units above the median that will require prior authorizations
- Criteria for the following services:
 - Consumer Choice Options
 - o Consumer Directed Attendant Care
 - o Home & Vehicle Modification
 - o Interim Medical Monitoring & Treatment
 - o Prevocational Services
 - o Respite Services
 - o Supported Community Living member (20 years of age or younger)
 - o Specialized Medical Equipment
 - o Environmental Modifications, Adaptive Devices
 - o Family & Community Support Services
 - o In-Home Family Therapy
- Certificate of Medical Necessity (separate form for each service type)

If you have any questions, please contact the IME Medical Service Unit at 1-800-383-1173, locally 515-256-4623.